Participant must provide all of the information below in English:

Participant's Name: Participant's Address: Participant's Email Address: Participant's Email Address: Name of Counsel: Address of Counsel: 2. Participant's Claim number and the nature of Participant's Claim: Claim Number: Nature of Claim: Unjustified dismissal Signature
Participant's Address: Participant's Email Address: Legarcia imanize gmail complete
Participant's Email Address: Degarcia jmoneze gnail-com
Name of Counsel: Address of Counsel: 2. Participant's Claim number and the nature of Participant's Claim: Claim Number: Nature of Claim: Unjustified dusmissal By: Signature
Address of Counsel: 2. Participant's Claim number and the nature of Participant's Claim: Claim Number: Nature of Claim: By: Signature
2. Participant's Claim number and the nature of Participant's Claim: Claim Number: Nature of Claim: By: Signature
2. Participant's Claim number and the nature of Participant's Claim: Claim Number: Nature of Claim: By: Signature
Claim Number: Nature of Claim: By: Signature Signature SJ2019CV 00849 Unjustified dismissal
Print Name Title (if Participant is not an individual) August 30, 2021 Date

Case:17-03283-LTS Doc#:18053-1 Filed:09/08/21 Entered:09/08/21 09:39:26 Desc Pro se Notices of Participation Page 2 of 51

ATTACHMENT 1 - Michell Lee Coarda finner - Unjustified dismissal (2014) Case # 55 2019CV00849. (non case). - I have the intention to participate an Discovery in connection with confirmation of the plan. - Please, pay me what the government owes me. There was no Bankrupey when all this happened They did harm to I proved my family: Even though dreceived nothing.

210720V2 CONFIRMATION DISCOVERY PROCEDURES NOTICE

Version July 20, 2021

Ocio

Version July 20, 2021

nan, PR D0918-1767





Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

ii any:
Participant's Name: Carmen M. Martell Morales
Participant's Address: Parce P. R. 60728 Rochdale 315
Participant's Email Address: <u>Carmenmarimartell31(a genail Com</u>
Name of Counsel:
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number: 41605
Nature of Claim: 17 BK 3283 - LTS
By: Carmen It Hartey Signature
Carmen M. Martell Morales Print Name
Title (if Participant is not an individual)
Date Date
<u>Instructions for Filing Notice of Participation</u> : If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/FCF docket event Notice

Parc. Magueyes Ave. Rochdale 315 Ponce P.R. 00728



Desc:





RETURN RECEIPT.

United States District Court Clerk's Office 150 Ave. Carlos Chardon Ste. 150 San Juan, P.R. 00918-1767

Participant must provide all of the information below in English:

Case: 17-03283-LTS Doc#:18053-1 Filed: 09/08/21 Entered: 09/08/21 09:39:26 Desc: Pro se Notices of Participation Page 7 of 51

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT DOTTED LINE
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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Juited States Mestriat Court, Sen Juan, P. L. 00918-1767

Participant must provide all of the information below in English:

1. Participant's contact information, including	ng email address, and that of its counsel,
if any:	
Participant's Name:	ique lorres
Participant's Address:	4 84 Camay, P. L. 0063.
Participant's Email Address:	que 01 ª gmail. com
Name of Counsel:	
Address of Counsel:	
Email Address of Counsel:	
2. Participant's Claim number and the natu	re of Participant's Claim:
Claim Number: 119167	
Nature of Claim: Public Imploy	ee and Vension Retire Slaw
By: Milsa Ragues John	St. St.
Signature	
MITSA Rogie for	95
Print Name Lndividual	en P
Title (if Participant is not an individual)	E Com
08-35-2021	
Date	
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Case:17:03283-LTS Doc#:18053-1 Filed:09/08/21 Entered:09/08/21 09:39:26 Desc:
Pro se Notices of Participation Page 9 of 51

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U.S. DISTRICT COURT

SAL BILL PR SILL

Gent's Glerk's Office, United States elestricat Court, Glerk's Office, 150 June Carlos Chardon Ste. 150, Sen Juan, P.R. 00918-1767

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel,
if any:
Participant's Name: Mitsa Kogue Torres
Participant's Address: P. D. Bry 84, Carney, P. F. 00627
Participant's Email Address: nitza. roque of & g mail. com
Name of Counsel:
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number: 0 13 46 71 0 12 6 71
Nature of Claim: Tublic Employee and Pension Kefire Claims
By: Relea Cours Joues
Mitza Koque Torres
Print Name
Individual
Title (if Participant is not an individual)
08-25-3031
Date

Case: 17-03283-LTS Doc#:18053-1 Filed: 09/08/21 Entered: 09/08/21 09:39:26 Desc: Pro se Notices of Participation Page 11 of 51

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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Juited States Plestrict Court, Sen Juan, P.R. 00918-1767 Case:17-03283-LTS Doc#:18053-1 Filed:09/08/21 Entered:09/08/21 09:39:26 Desc: Pro se Notices of Participation Page 12 of 51

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any:	
Participant's Name:	Frances Marta Cordora Aloire
Participant's Address:	2.0. Box 238, hotea, the 00772
Participant's Email Address:	frances alvisor 5/ 2 gmail . com
Name of Counsel:	
Address of Counsel: Email Address of Counsel:	e legal representation
2. Participant's	Claim number and the nature of Participant's Claim:
Claim Number:	165 499
Nature of Claim:	Public Employee Claims - # 12 808
By: Signature	. Old o
Frint Name	. Cóndo Aloire
Title (if Participant is	s not an individual)
Date 31 dug	12021 2021

Case:17-03283-LTS Doc#:18053-1 Filed:09/08/21 Entered:09/08/21 09:39:26 Desc Pro se Notices of Participation Page 13 of 51

August 31, 2021

Exposition

The governor Anibal Acevedo Vila in the years 2008-2009 approved in the years 2008-2009 approved or "First Education Law" as of july 1, 2007 an increase of I was and record the increase of Lor the next eight years until it reaches \$3,000.

This law was not fulfilled.

I receiver the approved increase

On the other hard working in the 1) Eccuela Warve Mediania Baja

3) Eccuela Lola Millan

3) Escuela Ceorgina Baguero

For ten (16) years I tid not receive a payment of \$100 amonth.

about 12,000.

Case: 17 03283-LTS Doc#:18053-1 Filed 09/08/21 Hits P.O. BEX 238 Lokea, PR 00772







Court's Clerk Office United States District Court Clark's office 50 Ave Carles Chardon Fte 150 Son Jean PR 00918-1767

17:5 Hd L- 638 1100

Case:17-03283-LTS Doc#:18053-1 Filed:09/08/21 Entered:09/08/21 09:39:26 Desc Pro se Notices of Participation Page 15 of 51

Participant must provide all of the information below in English:

Participant's contact information, including email address, and that of its counsel,

1.

if any:						
Participant's Name:	Lyis F		Torres			
Participant's Address:	HC-01-	- Box 1	081 - Are	cibo, P.	R.006	12
Participant's Email Address:		NIA	= P			
Name of Counsel:		MIA				
Address of Counsel:	A CONTRACTOR	N/A		21		
Email Address of Counsel:	20 20	NIA				
2. Participant's C	Claim number an	d the nature of	of Participant's (Claim:		
Claim Number:	16550	03				
Nature of Claim:	Roclamo	5 de Emp	deados Pú	blicos (ECFNO.1	2274
By: Luis A Je Signature	3 Jora	_ ′			aryon dili	885
- Control of the Cont	zTorres	5		6	S.D.	
Print Name				1	PART	
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Title (if Participant is	not an individua	al)		CI CI	ZEE.	
24 Agosto	2021			all a	-1 I	



Case:17-03283-LTS Doc#:18053-1 Filed:09/08/21 Entered:09/08/21 09:39:26 Pro se Notices of Participation Page 17 of 51

Participant must provide all of the information below in English:

 Participant's contact information, including email address, and that of its counsel, if any:
Participant's Name: Jose E. Vazquez Hernandez
Participant's Address: P.O. BOX 10553 Ponce P.R 00732
Participant's Email Address: jeuh 550 hotmarl. com.
Name of Counsel: MA
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number: 17 BK 3283- LTS
Nature of Claim:
By: Signature
Jos- E. Varquez Herendez
Print Name
25/8/2021
Title (if Participant is not an individual)
75 /8/2021 Date

Office, 150 Ave Coulos chardon

District Court, Clerks

Ste 150/ San Tuan PR, 00918-1767

Parc P.R. 00732

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Case:17-03283-LTS Doc#:18053-1 Filed:09/08/21 Entered:09/08/21 09:39:26 Desc Pro se Notices of Participation Page 19 of 51

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any: Ismael González Sanchez Participant's Name: Calle 13 I-14 Jardines Le Cayey Cayey, P. C. 00736 Participant's Address: Participant's Email Address: Name of Counsel: Address of Counsel: Email Address of Counsel: Participant's Claim number and the nature of Participant's Claim: 2. 110012 Claim Number: general Unscarred / Priority / Seared/503(b) (9) Admin Priority / Admin Priority Nature of Claim: Signature Print Name Title (if Participant is not an individual)

Doc#:18053-1 Filed:09/08/21 Entered:09/08/21 09:39:26 Pro se Notices of Participation Page 20 of 51 Case:17-03283-LTS Tomas

Cayey, P.R. 00735 Calle 13 I-14 Jourdines de Cayey

MEMPHIS TN 380

González Sánchez

30 AUG 2021 PM 4 L

San Juan, P.R. 00918-1767 Herks office 150 ave. Parlos Chardon Ste. 150 United States District Court

STATES OF THE PARTY OF THE PART

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel,
if any:
Participant's Name: Angel h. Santa Cimeda
Participant's Address: MC-50 BOX 40575, San Jacks
Participant's Email Address: <u>asanta 1943 e qual</u> com
Name of Counsel: Comyonwealth Plen Configuration
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number:
Nature of Claim:
By: •
Angel L. Senta Okedy.
Print Name Singc/2 A
Title (if Participant is not an individual)
Title (if Participant is not an individual) Lug 13, 2021. Date



Participant must provide all of the information below in English:

Participant's contact information, including email address, and that of its counsel,

1.

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Case:17-03283-LTS Doc#:18053-1 Filed:09/08/21 Entered:09/08/21 09:39:26 Pro se Notices of Participation Page 25 of 51

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any:
Participant's Name: Florinda Rivera Rodriquez
Participant's Address: HC-4 Box 50602 Horovis PR 0068
Participant's Email Address: rivera rodriguez florinda@ qmail. com
Name of Counsel: Hermann D. Bauer (USDC 100, 216) O'Neill & Borges LLC
Address of Counsel:
Email Address of Counsel: htt://www.pacer.psg.uscourts.gov
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number: (81128) and (85490) 500
Nature of Claim: Ley Promesa III NO-17-BK3283-L75
By: Blown Russ Braying
Floring Lorg Pedricus
Print Name
Title (if Participant is not an individual)
25/8/2021 Date

Instructions for Filing Notice of Participation: If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in In re Commonwealth of Puerto Rico, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

210720V2 CONFIRMATION DISCOVERY PROCEDURES NOTICE

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Case:17-03283-LTS Doc#:18053-1 Filed:09/08/21 Entered:09/08/21 09:39:26 Desc Pro se Notices of Participation Page 27 of 51

Participant must provide all of the information below in English:

Participant's contact information, including email address, and that of its counsel, if any:

ticipant's Name:

Nancy Mc Cormick Calimano

Participant's Name:			i i vi i i i i i i i i i i i i i i i i	
Participant's Address:	P.O. Box	681 Guay	juma, Puerto Ria	00785-06
Participant's Email Address:	nancymotorm	id 1950 2 - gma	il-com	
Name of Counsel:	1			 "
Address of Counsel:	s 		-	
Email Address of Counsel:				
2. Participant's C	Claim number and			
Claim Number:	PR 1845 SRF 5	3176 PACKID:	202345 MMUD: 3	318348-PSVC: MM
Nature of Claim:	The state of the s	ducation	<u> </u>	<u></u>
By: Mancy Mc Con Signature	mick Calema	m0	2000 2000 2000	U.S. T.
Nancy Mc Cor Print Name	mick Calima	no	1	
Title (if Participant is	not an individual		2	
25 de agosto	de 2021		ř	5

Rmte: Nancy Mc Cormick Calimano

Suayama, Puerto Rico 00785-0681 San Juan, PuertoRico 00918-1767

MEMPHIS TN 380

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Case:17-03283-LTS Doc#:18053-1 Filed:09/08/21 Entered:09/08/21 09:39:26 Desc: Pro se Notices of Participation Page 29 of 51

Participant must provide all of the information below in English:

1.	Participant's co	ontact information, including email address, and that of its counsel,
	if any:	
Participant's 1	Name:	Angel R. Morales - Biaggi
Participant's A	Address:	P.O. Box 371783 Cayer 0073
Participant's I	Email Address:	ange/morales 50 @ Jahoo. com
Name of Cour	nsel:	
Address of Co	ounsel:	
Email Addres	s of Counsel:	**************************************
2.	Participant's C	Claim number and the nature of Participant's Claim:
Claim Number	er:	17 BK 3283-LTS
Nature of Cla	im:	It's been a long time waiting.
Ву: 🔎	ngel RT	morales SA
Signat	aure .	
An	ge/P.	Morales - Biaggi
Print	Yame	
en e	_	2 3 6
Title (if Participant is	not an individual)
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Case:17-03283-LTS Doc#:18053-1 Filed:09/08/21 Entered:09/08/21 09:39:26 Desc: Pro se Notices of Participation Page 31 of 51

Participant must provide all of the information below in English:

1. Particip if any:	pant's contact information, including email address, and that of its counsel,
Participant's Name:	Maria Rosario - Rolón
Participant's Address:	P.O. Box 37/783 Capy P.R. 0013-
Participant's Email Ad	Idress: mariarosario5/3@ Jahoo · com
Name of Counsel:	
Address of Counsel:	
Email Address of Cour	nsel:
2. Particip	ant's Claim number and the nature of Participant's Claim:
Claim Number:	17 BK 3283-LTS 500
Nature of Claim:	It's been a long time waiting
By: X Marion Signature	Resain aulon
María	Rosario-Rolón
Print Name	
Title (if Doutiein	
Title (II Particip	pant is not an individual)
Date	9 20 21
The same of the sa	

00010-170025 San Juan

Participant's contact information, including email address, and that of its counsel,

Participant must provide all of the information below in English:

if any:
Participant's Name: Flavia V. Rondon Derisus
Participant's Address: HC-50 Box 40575; Son Borenzo, P.R. 00757
Participant's Email Address: fyrondon Denail. com
Name of Counsel: Commonwealth of Reco
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number:
Nature of Claim: By: Signature Flavia Mondon Serieus Print Name Print Na
Title (if Participant is not an individual) Deta. 6, 2021. Date
7

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Case:17-03283-LTS Doc#:18053-1 Filed:09/08/21 Entered:09/08/21 09:39:26 Desc: Pro se Notices of Participation Page 35 of 51

Participant must provide all of the information below in English:

if any: Arda Gonzalez Hernandez Participant's Name: 12232 Royal Palm Blud Coral Springs Fl 330LES Participant's Address: Participant's Email Address: aida ah 28 @ amail com NIA Name of Counsel: Address of Counsel: NA Email Address of Counsel: Participant's Claim number and the nature of Participant's Claim: Claim Number: Unpaid wages by the government of P.R. Nature of Claim: By:

Participant's contact information, including email address, and that of its counsel,

Title (if Participant is not an individual)

1.

August 27, 2021 Date

Gral springs, F1 33045 Rida 2232 Gorzaloz Hernandez Royal Palm Blvd

27 AUG 2021 PM 6

MIAMI FL

OEE

San Juan, P.R. obal8-1767 United States District CIENT'S Office

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any:	No. 1
Participant's Name: Fernando Velez	Morales
Participant's Address: Box 314 Maca Participant's Email Address: Fevrence (bombero @	P.R. 00676
Participant's Email Address: Ferrandoc/bombero @	gmail-com
Name of Counsel:	· · · · · · · · · · · · · · · · · · ·
Address of Counsel:	
Email Address of Counsel:	
2. Participant's Claim number and the nature of Partic	ipant's Claim:
Claim Number:	
Nature of Claim:	1.
By: X Zh uj Manke Signature	
Signature Fernando Velez Morales Print Name	SE SEE
Print Name	
Title (if Participant is not an individual)	
Date	

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Case:17-03283-LTS Doc#:18053-1 Filed:09/08/21 Entered:09/08/21 09:39:26 Desc Pro se Notices of Participation Page 39 of 51

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:
Participant's Name: Wilma L. Diaz or drumulub
Participant's Address: HC#22 DOX 11627
Participant's Email Address:
Name of Counsel:
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim:
Claim Number: No 17BK 3283 -LTS
Nature of Claim: Roomesa Ti He III
By: Waraf Signature
Wilma L Dias Print Name
Title (if Participant is not an individual)
Date
Instructions for Filing Notice of Participation: If you are represented by counsel, this Notice

Case:17-03283-LTS Doc#:18053-1 Filed:09/08/21 Entered:09/08/21 09:39/26

Pro se Notices of Participation Page 40 of 51 prique lu firmado, pera desconozco que estra asiendo. y la dirección a la gue enviara ese déciment no es mia. A SECRETARY OF THE RESERVE OF THE SECRETARY OF THE SECRET Tuncos Pa Box 1162

00318-170825

united states District Court clerks office 150 Ave. Carlos Chardon Ste. 150 San Juan PR 00918-1767



Case:17-03283-LTS Doc#:18053-1 Filed:09/08/21 Entered:09/08/21 09:39:26 Desc Pro se Notices of Participation Page 42 of 51

Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any.
Participant's Name: Jose G. Leon Muñoz
Participant's Address: HC03 BOX 12661 Juana Diaz P.R. 00795
Participant's Email Address: leon marcel 35egmail com
Name of Counsel:
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim: Claim Number: 17 BK 3283-LTS Nature of Claim: Promesa law III By: Signature Jose G. Leon Muño 2
Print Name 5 of
Title (if Participant is not an individual) 8 14 20 21 Date

Juana Diaz D. P. 00795

United States District Court 150 Ave Carlos chardon Ste. 150 in Juan, p.R. 00918-1767

MATERIAL PROPERTY AND ADMINISTRATION OF THE PROPERT



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Case:17-03283-LTS Doc#:18053-1 Filed:09/08/21 Entered:09/08/21 09:39:26 Desc Pro se Notices of Participation Page 44 of 51

Participant must provide all of the information below in English:

1. Participant's co	ontact information, including email address, and that of its counsel,
Participant's Name:	LIMA ARROYS PACHECO
articipant's Address:	of 27 FABUR DR. ORLANDO, F/ 32822.
Participant's Email Address:	Wsoto 153@gmail.com
Name of Counsel:	170/06
Address of Counsel:	11
Email Address of Counsel:	Paoloea
	laim number and the nature of Participant's Claim:
Claim Number:	laim number and the nature of Participant's Claim:
Claim Number: Nature of Claim: By: Signature of Claim:	Retired vounce
Claim Number: Nature of Claim: By: Signature Of Claim: Lina Annou Print Name	Retired rounce The Hackers 1. Pachaso
Claim Number: Nature of Claim: Signature W Or Direct Appear of Print Name Retail room	Retired vounce The Achaer Retired vounce Pachaer Retired vounce
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Morked STATES Wisterci Court, Marks office 150 Ave. CARLOS handow Ste. 150, SAN JUMA, P.R.



Case:17-03283-LTS Doc#:18053-1 Filed:09/08/21 Entered:09/08/21 09:39:26 Desc Pro se Notices of Participation Page 46 of 51

Participant must provide all of the information below in English:

1.

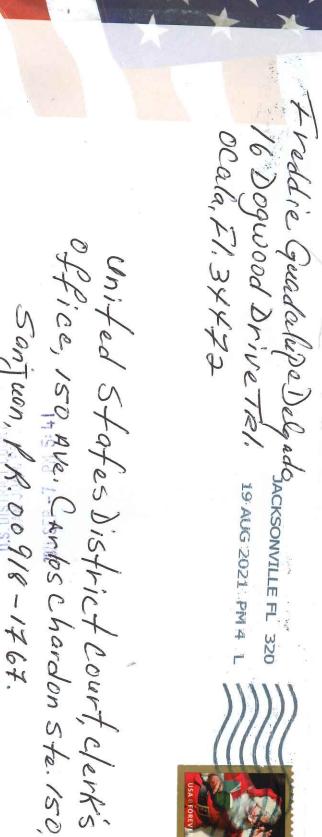
Participant's contact information, including email address, and that of its counsel,

if any:	
Participant's Name: Tamira Papan Perez	
Participant's Address: HC 1 Box 5083 Barrarguito, P.R. 00794-90	679
Participant's Email Address: Yamiravaleria Ogmail.com	
Name of Counsel:	
Address of Counsel:	
Email Address of Counsel:	
2. Participant's Claim number and the nature of Participant's Claim: Claim Number: 56518	
Nature of Claim:	y, 2 ²⁴
By: Vamire Pagan Peix Signature	
Print Name Title (if Participant is not an individual)	

> ranquitas, PR 00794-9675 00918-170625 30 AUG 2021 PEG

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counse if any:	•
Participant's Name: Freddie Guadalupe Delgado	1
Participant's Address: 16 Dogwood Drive TRI. ocala, Fl. 34	1472
Participant's Email Address: fg. delgado a hot mail. com	-
Name of Counsel:	_
Address of Counsel:	
Email Address of Counsel:	- 18 m
2. Participant's Claim number and the nature of Participant's Claim:	C E
Claim Number: 10228	S DIS
Nature of Claim: Inquiring about back Day	
By: Fredix Hundelip Diljado	
Frint Name Print Name	
Title (if Participant is not an individual)	
Date Date	



Participant must provide all of the information below in English:

1.

Participant's contact information, including email address, and that of its counsel,

if any:
Participant's Name: Luz T. Wevas
Participant's Address: P.O-B 0x3024 Avecilia PK W613
Participant's Email Address: Cuevas 12 T & gman, cm
Name of Counsel:
Address of Counsel:
Email Address of Counsel:
2. Participant's Claim number and the nature of Participant's Claim: Claim Number: 17 B/C 3283 LTS
Nature of Claim: prome Sq
By: Signature
Print Name Ly2 T. Cuevas
Title (if Participant is not an individual)
8/5/2031
Date

an P.N M918 1767

Carlos Charton Ste

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